

COMMONWEALTH of VIRGINIA

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES 600 East Broad Street, Suite 1300 Richmond, VA 23219

October 8, 2008

ADDENDUM No. 5 TO VENDORS:

Reference Request for Proposal: RFP 2008-02
Dated: August 13, 2008
Due: November 14, 2008

Below are updates that may delete, add, modify or clarify certain aspects of the aforementioned RFP. Please incorporate as necessary.

Page 2-15 §2.3, Offeror Profile, first paragraph top of page: REVISION – Paragraph revised to read per the following:

In addition, Offeror is asked to provide a synopsis or case study of results attributable to its commitment to high quality and increased operating efficiency. This is requested to demonstrate the added value the Offeror can offer and indicate the typical ongoing past cost reductions and solution efficiencies DMAS could expect to realize that the Offeror has accomplished.

Page 2-15 thru Page 2-18, §2.3 Offeror Profile, Service and Support Management: DELETE – Delete this section in its entirety.

Page 3-5 §3.4.1 Platforms, Table 3.4.1, 7th Row of Table, 1st, 2nd, and 3rd Columns: CHANGE – Change Diagram Ref #, Make/Model, and Operating System information per the following:

9- 13	IBM Unix System P5 510Q (1) Intel Based (2) (1) CPU 3.2 GHz RAM 3.5 3.6 GB Storage 12 383 GB (2) CPU 3.2 GHz RAM 3.6 GB Storage 198 GB	IBM AIX Version 5:3:0:0 Microsoft Windows 200X Server	Remedy Version 6.3 w/patch20	Development Test Production	77	Custom Remedy application used to support CM DMAS, Information Service Requests (ISRs) Tracking System.
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Appendix A.II: Service Level Methodology, Page A.II -4, Item E. Continuous Improvement, 2^{nd} sentence:

REVISION – Sentence revised to read per the following:

Beginning 12 months after the implementation of Service Level Credits on July 1, 2010 and on each annual anniversary thereof, the Parties shall **review and** adjust **as necessary** the Minimum Performance Level for each Service Level so that the Improvement Adjustment for each Service Level is calculated as (the average of the six (6) highest or best monthly actual results that are above or better than the Minimum Performance Level during the preceding twelve (12) months minus the current Minimum Performance Level) multiplied by 20%.

Appendix E.I, Page E.I – 13, #68: DELETE – Delete the word "software" from bullet one (see below).

68.	Does the Offeror agree to provide EDI technical and customer support for DMAS, service centers, and other stakeholders to include the following activities: • Provide a software test environment that allows for end-to-end	
	 Provide a software test environment that allows for end-to-end testing with potential trading partners; Test and implement updated versions of software as updates become available; 	
	 Provide a toll-free number and e-mail support to providers, service centers, DMAS, and other stakeholders; Provide support staff during normal business hours; Provide and maintain documentation posted on the DMAS Medicaid Web portal for EDI enrollment, environment access, and transaction transmission policies and procedures for service centers, including companion guides that supplement standard 	
	 implementation guides; Assist service centers with file transfers, enrollment, testing, and authorization activities; and Follow-up with service centers that receive compliance errors and assist as needed with identifying any problems and corrections? 	
	Describe the approach.	

Appendix E.I, Page E.I – 35, #160:

REMOVE AND REPLACE – Delete Requirement #160 and replace per the following:

160.	Does the Offeror agree to provide DMAS with a Takeover organization chart including a named project manager for the Takeover Phase?
	Does the Offeror agree as part of the proposal, to provide
	DMAS with a Takeover organization chart including a named
	certified Project Manager Professional (PMP), a resume and
	three references?

Appendix E.I., **Page E.I.** – **35**, #163:

REMOVE AND REPLACE – Delete Requirement #163 and replace per the following:

163.	Does the Offerer agree to follow the Commonwealth's project	
	management standard ITRM-CPM-112-02 determined and communicated by DMAS and to provide a PMI certified project manager?	
	Does the Offeror agree to follow the Commonwealth Project	
	Manager Standards ITRM-CPM-112-02?	

Appendix E.II, Table E-3, Page E.II – 6:

ADD – Additional wording added to sentence under "Definition" (see below)

Table E-3. MMIS General Availability Service Levels

DEFINITION

MMIS General Availability is defined as the applications and technical infrastructure availability to support mission critical business processing and functions and excludes scheduled maintenance.

Appendix E.II, Table E-3, Page E.II – 6:

ADD – Additional wording added at end of Performance Target description for ID 1 (see below).

1			General Inquiry and Update Mode: Mon-Fri, 06:15-2000 Sat, 06:15-1700	
	Medicaid Enterprise production availability to users during posted hours.	Aggregate Availability	General Inquiry only mode: Available in this mode when not in the "General Inquiry and Update Mode" less system maintence window. Inquiry and Update Mode for Pharmacy Point of Sale: Sun-Sat, 0000-2400	99.5%
			Inquiry Mode for Medicaid Web Portal (ARS, etc) and Medical: Sun-Sat, 0000-2400	
			Scheduled System Maintenance: Sun-Sat, 0200 (2 AM)	

Appendix E.II, Table E-3, Page E.II – 6:

CHANGE – Change "Minimum Performance %" from 99.8% to 99.5% in Row 2 For "Test and development environment availability to MMIS development staff" (see below).

2	Test and development environment availability to MMIS development staff.	Aggregate Availability	Sun-Sat, 0000-2400.	99.8% 99.5%
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Appendix E.II, Table E-7, Page E.II – 13:

CHANGE – Under item #14, Performance Target, Change 48 hours to 2 business days (see below).

14	Return all paper payment	Response	Returned ≤ 48 hours 2 business	100%
	requests with missing key		days after receipt.	
	fields.			

Appendix F.I, Page F.I-12, #60:

REMOVE AND REPLACE – Delete Requirement #60 and replace per the following:

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Appendix F.I, Page F.I – 13, #65:

REMOVE AND REPLACE – Delete Requirement #65 and replace per the following:

	Does the Offeror agree to provide DMAS with a Takeover Organization chart including a named project manager for the Takeover Phase?
65.	Does the Offeror agree as part of the proposal, to provide DMAS with a Takeover organization chart including a named experienced project
	manager, a resume, and three references?

Appendix G.I, Page G.I – 9, #78:

REMOVE AND REPLACE – Delete Requirement #78 and replace per the following:

ed and	Does the Offeror agree to follow the Commonwealth's project-management methodology ITRM-CPM-112-02 as determined and communicated by DMAS and provide a project manager? Does the Offeror agree to follow the Commonwealth Project Manager Standards ITRM-CPM-112-02?	78.
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Appendix G.I, Page G.I – 9, #80:

REMOVE AND REPLACE – Delete Requirement #80 and replace per the following:

	Does the Offeror agree to provide DMAS with a Takeover	
	Organization chart including a named project manager for the	
	Takeover Phase?	
80.	Does the Offeror agree as part of the proposal, to provide DMAS	
	with a Takeover organization chart including a named	
	experienced project manager, a resume, and three references?	

See Attachment 1 for list of additional questions posed by Offerors and the Department of Medical Assistance Services response.

Please Note: Some questions may take additional time in order to generate an adequate response. If you do not see a response to a question you have submitted, please monitor the DMAS and eVA website for future addendums.

Note: A signed acknowledgment of this addendum must be received by this office either prior to the due date and hour required or attached to your proposal response. Signature on this addendum does not substitute for your signature on the original proposal document. The original proposal document must be signed.

Sincerely,

Christopher M. Banaszak

DMAS Contract Manager

Name of Firm:	
Signature and Title:	
Date:	

DMAS#	Vendor	RFP Cite	Vendor Question	DMAS Response
153	BCBSSC	2.1.9 (p. 2-3)	Paragraph 5 states, "The Offeror must provide as a separate appendix to its proposal a list of all pages in the proposal and a specific identification of the data or materials to be protected and the reason it deems such information proprietary."	Required appendix should be included under "Detailed Description of Proposed Solution(s)" section, CD-ROM No.1, referenced on RFP Table 2.2
			In preparing our response to the RFP, should we place the appendix referring to proprietary information in the "Contractor's Optional Appendices to Proposal" Section referenced on RFP Table 2.2, Requirement 2.2 Proposal Format for CD-ROM No. 1? If not, where should we place it?	
154	CSC	Table 2.2 (p. 2-11)	Table 2.2 on page 2-11 includes the statement: "Any comments in the form of a redline markup for Service Level Agreements for E.II, F.II or G.II must be included, as well." Does DMAS desire that an offeror's pricing reflect the SLAs as redlined by the offeror?	Yes.
155	EDS	2.3 (p. 2-15)	Requirement 2.3 states: In addition, Offeror is asked to provide a synopsis or case study of results attributable to its commitment to high quality and increased operating efficiency. This is requested to demonstrate the added value the Offeror can offer and indicate the typical ongoing cost reductions and solution efficiencies DMAS could expect to realize. Should we answer this in percentages of ongoing cost reductions because, according to requirements, no pricing is to be included in this section of the proposal?	DMAS will correct the statement. DMAS' intent was to review past experiences based on a synopsis or case study, not to give ongoing cost information.

156	EDS	3.4.1 (p. 3-4)	What is the mainframe DASD hardware model and vendor?	EMC – currently, there are 2 EMC 8530 escon 8gb cache, but will be migrating to a new EMC DMX1000 FICON model with 9.5TB capacity by end of month October. The DASD capacity supports multiple accounts.
157	EDS	3.4.1 (p. 3-4)	What is the mainframe monthly tape utilization in GBs?	Tape utilization is not measured in GBs. Only tape mounts are measured.
158	EDS	3.4.1 (p. 3-4)	What is the mainframe tape hardware model and vendor?	STK/IBM – 3490E – Currently a VSM3 virtual tape system exists with 64 virtual drives, which has reached its end of service life. It will be upgraded to a VSM4 FICON system with 256 virtual drives, including 9840D, 9840C RTD LSM, before the end or the year. 9840s can hold 40 GB of data.
159	EDS	3.4.1 (p. 3-4)	What are the number of DB2 subsystems in the mainframe environment?	There are currently two (2) DB2 environments, DBP1 for Production and DBT1 for Development and Testing.
160	EDS	3.4.1 (p. 3-4)	Can we assume that there are no other interactive software systems running in the mainframe environment beyond CICS and DB2? If others are present, please identify.	No, others include Princeton Softech for DB2 & Log Analyzer for DB2 and SYSB-II by H&W Systems.
161	EDS	3.4.1 4.1.2.17 (p. 3-5)	The Edify application version information appears to have been cut off. What is the currently installed version of Edify? What version and service pack of Windows Server 200X is the Edify system running on?	Edify 9.0 Windows 2000 - Version 5.0 Service pack 4
162	EDS	3.4.1 (p. 3-5)	What is the original installation date of the Edify VRU system?	Late 1998
163	EDS	3.4.1 (p. 3-5)	What is the current port count and port size for the current Edify VRU system?	There are 62 voice ports. Each port handles one call at a time.

164	EDS	3.4.1 (p. 3-5)	The Edify application information lists "62" as a transaction volume. What transaction volume timeframe does this number represent (i.e. hourly, daily, or weekly)?	"62" is the number of calls the system can handle at any given moment.
165	EDS	3.4.1 (p. 3-5)	What is the serial number for the Edify system?	Not Relevant.
166	EDS	3.4.1 (p. 3-5)	What vendor currently provides service and maintenance for the current Edify system?	Voice Technologies
167	EDS	3.4.1 (p. 3-5)	Can DMAS confirm that there are three physical IBM Unix servers in the current FA environment? What kind of virtualization separates the development, testing, and production instances in these servers?	There is no virtualization. There are 3 IBM Unix servers in the current FA environment. One is used for FirstDARS production environment — shared with other accounts One is used for First DARS development/test environment — shared with other accounts One is used to host ETL/Extract loads which retrieve data for the Preferred Drug Management System (PDMS). This is a production environment only and is shared by other accounts.

168	EDS	3.4.1 (p. 3-5)	Can DMAS provide hardware sizing details about the Sybase Database Translator (CPU, memory, disk usage)?	Server: Win2000 5.0.2195 SP4 HP ProLiant DL380 G4 4 CPU Processors: x86 Family 15 Model 4 3600mhz
				Drives: C: 9.77 GB D: 193 GB Memory: 3 GB
				Usage: CPU up to 40% Memory – up to 1.9 GB Disk – 130 GB
169	EDS	3.4.1 (p. 3-5)	Can DMAS provide a breakdown of the production, test, and development hardware for the SAS, Edify, and MediCall applications?	 Edify and Medicall 1 Intel based server running Windows 2000 v 5.0 sp4 – production environment only 1 Intel based server running Windows 2000 v 5.0 sp4 – development/test environment only Both servers are shared with other accounts
				 SAS 1 Intel based server running Windows 2000 production environment – shared with other accounts Test environment - separate server farm (3 machines) shared with all Coventry corporate SAS users

170	EDS	3.4.1	Can DMAS break down the various Windows/Intel	3 Intel based servers, running Windows 2000 – production
		(p. 3-5)	servers in reference 15 between physical production,	environment only – supporting Virginia.fhsc.com. These
			test, and development hardware?	servers are shared with other accounts.
				11.411 1 2000 1.4
				1 Intel based server, running Windows 2000, production
				environment only – supporting vammis.fhsc.com. Server is shared with other accounts.
				shared with other accounts.
				1 Intel based server, running Windows 2003.
				development/test environment only - supporting
				vatest.fhsc.com. Server is shared with other accounts.

171	ACS	4.1.2.15.1	Will DMAS please confirm that all system-generated	The M	IMIS mailing vendor reformats all MMIS letters as
		(p. 4-33)	reports and letters produced by the MMIS and are in	follow	rs:
			final print format and no manipulation is performed	1.	Inserts the DMAS logo at the top of all letters with
			made by the print vendor or another FAS contracted		a portrait orientation.
			vendor?	2.	Inserts an additional heading line under the DMAS logo for 20 letters.
			If format changes are made by the print vendor, please	3.	The formation the manne and address information the
			indicate which reports/letter are reformatted and		the use of the United States Postal Service (USPS)
			summarize the changes that are made.		software to add +4 zip for all 113 letters.
					Compresses blank address lines (if the attention
				1	line is not used) for 80 letters. Removes the internal header control line that is
				7.	sent with each letter. The control line contains
					specific information (<i>e.g.</i> letter ID, starting
					position of name and address, etc.) for each letter.
				5.	*
					first page of a mail piece, 5/8 inch from the bottom of the form.
				6.	Adds Optical Marks Read (OMR) marks to the top
					right of the letters for vendor internal processing.
				7.	Prints a keyline at the top of the name and address
					for vendor and USPS providing delivery
					information.
				8.	
					address (for valid name and address combinations)
					providing delivery information.
				9.	Troduces cover sheets for retters that do not have
					the name and address in the standard position, <i>i.e.</i>
					9 landscape oriented letters.

172	EDS	4.1.6 (p. 4-44)	What is the average frequency of updates to the mainframe code base, through both the ISR process and normal software refresh activities? What is the average frequency of updates to the client/server applications, through both the ISR process and normal software refresh activities?	Mainframe custom applications: Production Emergencies are handled when they occur. Scheduled production build migrations are twice a week. Production Maintenance Releases occur every two weeks. Special Track Releases are most often migrated with a production maintenance release but are date constraint driven. Routine releases are quarterly.
				Non-mainframe custom applications: Production emergencies are handled when they occur. Code migrations occur if the application was changed as part of a release development effort.
				System software refresh (all platforms): the FAS contractor is responsible for maintaining manufacturer supported product versions on all proposed platforms and COTS software. This includes planning, testing, and implementation of software/hardware refreshes. Frequency, planning, and execution will be determined by the FAS contactor.
173	EDS	6.1.1.1 (p. 6-1)	Please clarify what is meant by converted and non-converted outpatient drugs? If it is related to the billing method whether it is based on procedure codes or NDC codes, will there be a method to know which claims are converted and which are not?	Professional drug claims are submitted with a HCPCS code and the HCPCS units along with the NDC. Therefore, for a professional drug claim, the units dispensed must be converted before rebate invoicing. Institutional outpatient drug claims are submitted with either a HCPCS code and/or an NDC. When an institutional outpatient claim is submitted with only a HCPCS code, the units dispensed must be converted.

174	EDS	Appendix A.I (p. A.1-2)	Appendix A.I: Small Business Subcontracting Plan is requiring Offerors to provide "Planned Contract Dollars During Initial Period of the Contract."	Yes, an Offeror's submission of Appendix A.I: Small Business Subcontracting Plan should be included with CD-ROM No.2, Pricing, as identified under RFP Table 2.2: Proposal Format.
		Table 2.2: Proposal Format, 5 th row (p. 2-11)	This requirement is contradictory to the requirement in Table 2.2: Proposal Format: Detailed pricing as specified in Section 4.4, 5.4, or 6.4. Submitted in a separate envelope a hard copy file and CD. Do not include any pricing data in any other section of the proposal. Should Appendix A.I be included in the Cost Proposal as it is asking for pricing?	Table 2.2 has been updated to reflect this change.

175	CSC	Appendix A.II	The Parties agree that Contractor shall continuously	DMAS does not see a conflict.
		E. Continuous	improve the Service Levels during the Term of the	
		Improvement	Agreement in accordance with this Section. Beginning	A Contractor's Continuous Quality Improvement program
		(p. A.II-1)	12 months after the implementation of Service Level	may very well result in recommendations to DMAS for
			Credits on July 1, 2010 and on each annual	additions/changes/deletions to specific SLAs contained in
			anniversary thereof, the Parties shall adjust the	E.II, F.II, and G.II. If DMAS concurs, the SLA change
			Minimum Performance Level for each Service Level	mechanisms for these improvements are documented in
			so that the Improvement Adjustment for each Service	A.II, D. CHANGES TO PERFORMANCE
			Level is calculated as (the average of the six (6)	MEASUREMENTS.
			highest or best monthly actual results that are above or	
			better than the Minimum Performance Level during	A.II, E. CONTINIOUS IMPROVEMENT is targeted for
			the preceding twelve (12) months minus the current	adjusting the minimum performance level for ongoing
			Minimum Performance Level) multiplied by 20%.	SLAs based on history. The formula can result in EITHER
			The Improvement Adjustment is then added to the	tightening or loosening of the minimum performance level.
			current Minimum Performance Level in order to	
			establish the new Minimum Performance Level.	
			The proposed language appears to set the Contractor	
			in conflict with Continual Quality improvement and	
			meeting exceedingly tighter SLAs. Is DMAS willing	
			to consider a Quality Improvement program that	
			eliminates this conflict?	

176	CSC	Appendix A.II	In page A.II-4 of Appendix A, the RFP states: "The	DMAS recognizes the point and will modify the
		E. Continuous	Parties agree that Contractor shall continuously	requirement.
		Improvement	improve the Service Levels during the Term of the	
		(p. A.II-4)	Agreement in accordance with this Section. Beginning	
			12 months after the implementation of Service Level	
			Credits on July 1, 2010 and on each annual	
			anniversary thereof, the Parties shall adjust the	
			Minimum Performance Level for each Service Level	
			"	
			We believe that COV will benefit from continuous	
			improvement (per the formula specified in this	
			Section of the RFP) of most of the service level	
			targets. However, there are some service levels targets	
			for which little-to-no benefit from continual	
			improvement will be realized by COV; yet substantial	
			increased costs could result if the DMAS formula for	
			improvement were to be applied to them. An example	
			of this is "24 x 7 system up time at 99.8% Minimum	
			Performance." Another example is: "notification of	
			outages to DMAS in less than 5 minutes."	
			Will DMAS modify this requirement from "each	
			Service Level" to "most Service Levels?"	

177	BCBSSC	Appendix D 1.1.6 (p. D-13)	The summary of current Web functionality available and maintained by the FA includes a tutorial for Pharmacy Web Prior Authorization. Please clarify:	The Contractor will not need to take over this functionality or develop a similar application. The Pharmacy Web Prior Authorization application is supported under the PDL contract.
			- We understand this functionality is current and maintained by the incumbent FA. Is the Pharmacy Web Prior Authorization application a requirement of this contract?	
			- If so, will the Contractor take over this functionality from the current FA and maintain it, or do we need to develop a similar application?	
178	EDS	Appendix E.I #54 (p. E.I-10)	What is the current prior authorization process for pharmacy?	Pharmacy prior authorizations are part of a separate Prior Authorization/PDL contract. This question is not relevant to this RFP.
179	ACS	Appendix E.1 #59 (p. E.I-11)	"Does the Offeror agree to prepare comprehensive reporting consistent with standards and deliverables supporting the various Virginia Medicaid pharmacy programs"?	The reports that support the various Virginia Medicaid pharmacy programs are generally ad hoc. See requirement E.I #78.
			Does the term "prepare" imply that this functionality does not exist today and must be implemented during the takeover / transition phase?	The Offeror must provide the server.
180	CSC	Appendix E.I #68 (p. E.I -13)	Req # 68 states: "Provide a software test environment that allows for end-to-end testing with potential trading partners."	The Offeror must provide the server.
			Who will provide this server, DMAS or the vendor?	

181	EDS	Appendix E.I #73 (p. E.I-16)	Define "timely, mass updates" on medical and administrative codes data.	A timely mass update occurs within 30 days of receipt of new and/or updated medical and administrative codes. No. The updates can be quarterly, annual or on demand.
			Is this process limited to the standard quarterly and annual updates?	No. The function applies to batch and manual updates.
			Is this function for batch updates only?	As a rule, all updates of medical and administrative codes data are batch updates, and manual updates are an exception. Potentially all codes could be subject to manual
			What reference data will be manually entered?	update if, for example, individual code updates are required for which a DMAS resource is unavailable or if the batch process fails and cannot be fixed in time to accommodate the desired effective date.
182	CSC	Appendix E.I #160 (p. E.I-35)	Reference: Req #160: " provide DMAS with a Takeover organization chart including a named project manager for the Takeover Phase"	No. However, see addendum for modifications related to this position.
			Question: The takeover manager is a critical position for the success of the Takeover Phase. Will DMAS designate this as a Key Position?	

183	CSC	Appendix E.I #160 (p. E.I-35)	Req #160 asks: "Does the Offeror agree to provide DMAS with a Takeover organization chart including a named project manager for the Takeover Phase?" Appendix F.I Requirement #65, and Appendix G.1 Requirement #80, ask the same question. Since it is possible for one contractor to receive award of any two contracts of the RFP, we recommend that it be acceptable to DMAS that an offeror bid the same individual as the Takeover Project Manager in two or three proposals responding to this RFP. We believe this could be accomplished well by a qualified project manager, and substantial savings would accrue to DMAS as a result. Does DMAS agree to allow this?	DMAS will conduct separate and independent evaluations of each Offeror's proposal, regardless of whether the Offeror bids on multiple contracts. DMAS does not restrict an Offeror from submitting the same individual for any proposal.
184	BCBSSC	Appendix E.I #174 (p. E.I-37) Appendix E.III Section L (p. E.III-10)	Question 174 states, "Does the Offeror agree to accept and house existing hardcopy files? Describe the approach." Do the volumes in Section L. Paper Document Storage represent all the hard copy files that will be transferred from the incumbent? If not, please provide other estimated volumes. How often will these stored documents need to be retrieved or accessed?	The volumes given represent all the hard copy files to be transferred; however, the volumes are approximate and may vary slightly at the time of the transfer. Because images of documents are accessible, requests for actual paper documents are infrequent.
185	EDS	Appendix E.II Table E-3 (p. E.II-6)	In table E-3, DMAS lists the aggregate availability of the Medicaid enterprise production environment as 99.5%. DMAS lists aggregate availability of the test and development environments as 99.8%. Is this a typographical error? If not, can DMAS elaborate on the need for a higher SLA for test than production?	The SLA for the development environment is changed to 99.5%.

186	CSC	Appendix E.II	Item # 14 states that all paper payment requests with	Yes.
		Table E-7	missing key fields must be returned \leq 48 hours after	
		#14	receipt.	
		(p. E.II-13)		
			Will DMAS restate this target as "Return ≤ 2 business	
			days after receipt"?	
187	CSC	Appendix E.II	Item #22: Provide hardcopy payment information ≤ 2	See response to question 148 in Addendum 3.
		Table E-7	working days or upon DMAS request.	
		#22	Will Contractors have to marride DA comics to	
		(p. E.II-13)	Will Contractors have to provide RA copies to	
188	CSC	Ann andire E II	providers? (This is currently performed by DMAS.)	Yes.
188	CSC	Appendix E.II, Table E-8	In the Definition section of Table E-8, General	Yes.
			System Availability Service Levels, the RFP states	
		(p. E.II-15)	that " Availability is for the single unit and is not	
			the availability of the aggregated servers and excludes	
			scheduled maintenance." The RFP then includes	
			specific Pre-Scheduled Downtime Requirements.	
			Table E-3, MMIS General Availability Service	
			Levels, does not include an exclusion for scheduled	
			maintenance related to system availability. Will	
			DMAS please include an exclusion for pre-scheduled	
			downtime for performance targets in Table E-3 for	
			entries related to system availability.	
189	CSC	Appendix F.II	Appendix F.II, Table F-3, #10: This SLA indicates	See Section 6.3.2.2 SLA Monitoring and Reporting.
		Table F-3 #10	that Key Personnel must be available Monday -	
		(p. F.II-3)	Friday from 0800-1700 excluding state holidays and	
			DMAS pre-approved exceptions 95% of the time.	
			Please define the expectation of how this should be	
			tracked and reported.	